

## Client Complaint / Grievance / Suggestions

### PURPOSE:

To develop a process for capturing and utilizing client feedback and concerns to enhance the provision of services at Riverview Psychiatric Center.

To utilize Peer Specialists to support clients in participating in organizational improvement through sharing Complaints / Grievances / Suggestions.

To uphold each client's rights to file grievances in accordance with all federal, state, licensing, accreditation, and other legal standards, including the court orders in Bates vs. Nicholas.

**POLICY:** Client Complaint / Grievance / Suggestions will be sought as an important source of information useful in continuously improving service.

Clients have the right to due process with regard to grievances. This due process is spelled out in Code of Maine Rules, 14-193 CMR ch. 1, Part A, section VII, and "Rights of Recipients of Mental Health Services."

Notwithstanding any other civil or criminal recourse the person bringing the grievance may have, the Hospital welcomes and affords every opportunity for informal resolution of concerns or formal resolution of grievances.

Notice summarizing a client's right to due process with regard to grievances, as well as copies of forms to be used for that purpose, are available within each program area. Each client is informed of this right, in a manner designed to be comprehensible to the individual recipient, by an employee of the hospital.

Burden of proof in all grievances is on the Hospital to show compliance, or remedial action to comply with policies and procedures established to ensure the rights of Clients under Department rules.

**PROCEDURES:** The Hospital's Complaint / Grievance / Suggestion procedure is categorized by the following Levels:

#### Level I

A "Complaint / Grievance / Suggestion" box shall be placed on each treatment unit, the treatment mall, and the cafeteria. A "Complaint / Grievance / Suggestion" form shall be made available in the same location of each box. Any person, on behalf of a client, may also initiate a Complaint / Grievance / Suggestion by completing a form and placing it in the Complaint / Grievance / Suggestion box or handing it to any RPC employee.

Any client or a staff member on behalf of a client can complete a “Complaint / Grievance / Suggestion” form and place it in the locked box. Staff is to help clients complete the form as they request.

Each morning, a Peer Specialist will collect the forms and schedule a meeting with each client to: (1) enhance understanding of the client’s area of concern and (2) enhance understanding of the outcome sought by the client. The Peer Specialist may rewrite the form with the client’s permission to augment the communication.

The Peer Specialist shall copy the form and send it to the Office of Advocacy.

The Peer Specialist shall send a copy of the form to the RPC Risk Manager.

The Risk Manager will maintain a file of reviewed forms and assure that client grievances, concerns, complaints are responded to in a timely fashion.

The Peer Specialist shall send the original form to the appropriate first review party. Typically, this is the Program Services Director. (In the case of the complaint or suggestion centering on a provider off the unit, they would be the first responder).

The first review party shall review the form and meet with the client to discuss the complaint, concern, or suggestion and look for resolution. The first responder shall write the proposed outcome on the form after discussion with the client. The recommendation must be made by the end of the fifth regular business day unless the Superintendent grants an extension.

The client shall review the form with the first responder and mark his/her reaction at the bottom: ☐ Agrees, ☐ Disagrees, ☐ Disagrees, please submit to the Superintendent.

## Level II

The Superintendent shall offer a proposed outcome to the client. The client shall review the letter and mark his/her reaction at the bottom: ☐ Agrees, ☐ Disagrees, ☐ Disagrees, please forward to the appropriate Deputy Commissioner of Program Services in the Department of Health and Human Services.

The Grievance Rules shall then be implemented consistent with the Code of Maine Rules, 14-193 CMR ch. 1, Part A, section VII, and "The Rights of Recipients of Mental Health Services."

## Exceptions

1. Grievances regarding abuse, mistreatment, or exploitation.

Any allegation of abuse, mistreatment, or exploitation shall be immediately reported to the Office of Advocacy and to the Department.

Peer Specialists shall forward any grievance that the grievant considers urgent within one working day to the Superintendent. This will be considered a Level II grievance. A copy of the grievance will be sent to the Office of Advocacy. The Superintendent, who shall either arrange to hear the grievance within three working days or immediately refer the grievance to Level I, must review such grievances.